

will be funded. It is strongly recommended that statewide collaborative efforts be forged with organizations with experience working with or representing the targeted population.

## 2. Cost Sharing or Matching

Grantees are required to provide at least 25 percent of the total program costs from non-federal cash or in-kind resources in order to be considered for the award. In accordance with 48 U.S.C. 1469a (d), matching requirements are waived for grantee applicants from Guam and the U.S. Virgin Islands.

## 3. DUNS Number

The Office of Management and Budget requires applicants to provide a Dun and Bradstreet (D&B) Data Universal Numbering System (DUNS) number when applying for Federal grants or cooperative agreements on or after October 1, 2003. It is entered on the SF 424. It is a unique, nine-digit identification number, which provides unique identifiers of single business entities. The D-U-N-S number is *free and easy* to obtain.

Organizations can receive a DUNS number at no cost by calling the dedicated toll-free DUNS Number request line at 1-866-705-5711 or by using this link: [https://www.whitehouse.gov/omb/grants/duns\\_num\\_guide.pdf](https://www.whitehouse.gov/omb/grants/duns_num_guide.pdf).

## 4. Intergovernmental Review

Executive Order 12372, Intergovernmental Review of Federal Programs, is not applicable to these grant applications.

## IV. Application and Submission Information

All applicants are required to submit electronically through <http://www.grants.gov> by midnight April 28, 2006.

Exceptions to this requirement may only be made by the AoA grants management officer, Stephen Daniels on (202) 357-3464. Exceptions may only be made to allow for catastrophic events such as tornadoes, floods, etc. Applicants are responsible for mailing or hand delivering applications to AoA in sufficient time to be received by 5:30 p.m. Eastern Time, April 28, 2006.

Please note AoA is requiring applications for this announcement to be submitted electronically through <http://www.grants.gov>. The Grants.gov registration process can take several days. If your organization is not currently registered with <http://www.grants.gov>, please begin this process immediately. For assistance

with <http://www.grants.gov>, please contact Arthur Miller at AoA's Grants.gov helpdesk at (202) 357-3438. At <http://www.grants.gov>, you will be able to download a copy of the application packet, complete it off-line, and then upload and submit the application via the Grants.gov Web site.

Applicants unable to submit their application via <http://www.grants.gov> may request permission to submit a hard copy from AoA Grants Management Officer, Stephen Daniels, (202) 357-3464, [Stephen.Daniels@aoa.hhs.gov](mailto:Stephen.Daniels@aoa.hhs.gov).

## 1. Address for Application Submission

Hard copy submissions for which approval has been requested and received (per section IV(6) of the announcement), may be mailed to the U.S. Department of Health and Human Services, Administration on Aging, Office of Grants Management, Washington, DC 20201, attn: Stephen Daniels (HHS-2006-AoA-Initial-SM), or hand-delivered (in person, via messenger) to the U.S. Department of Health and Human Services, Administration on Aging, Office of Grants Management, One Massachusetts Avenue, NW., Room 4604, Washington, DC 20001, attn: Stephen Daniels (HHS-2006-AoA-SM-0603).

Applications not submitted electronically must include one original and two copies of the application. Please include a stamped self addressed postcard for acknowledgement of receipt. Instructions for electronic mailing of grant applications are available at <http://www.grants.gov/>.

## 2. Submission Dates and Times

To receive consideration, applications must be received by the deadline listed in the **DATES** section of this Notice.

## V. Responsiveness Criteria

Each application submitted will be screened to determine whether it was received by the closing date and time. Applications received by the closing date and time will be screened for completeness and conformity with the requirements outlined in Sections III and IV of this Notice and the Program Announcement. Only complete applications that meet these requirements will be reviewed and evaluated competitively.

## VI. Application Review Information

Eligible applications in response to this announcement will be reviewed according to the following evaluation criteria: Purpose and Need for Assistance (20 points); Approach, Work Plan and Activities (30 points); Project

Outcomes, Evaluation and Dissemination (30 points); and Level of Effort (20 points).

## VII. Agency Contacts

Direct inquiries regarding programmatic and grant issues to:

*Project Officer:* U.S. Department of Health and Human Services, Administration on Aging, Washington, DC 20201. Attn: Barbara Lewis. Telephone: (202) 357-3532, e-mail: [Barbara.Lewis@aoa.hhs.gov](mailto:Barbara.Lewis@aoa.hhs.gov).

*Grants Management Specialist:* U.S. Department of Health and Human Services, Administration on Aging, Washington, DC 20201. Attn: Stephen Daniels. Telephone: (202) 357-3464, e-mail: [Stephen.Daniels@aoa.hhs.gov](mailto:Stephen.Daniels@aoa.hhs.gov).

Dated: March 14, 2006.

**Josefina G. Carbonell,**

*Assistant Secretary for Aging.*

[FR Doc. E6-3932 Filed 3-16-06; 8:45 am]

BILLING CODE 4154-01-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

[60Day-06-06AW]

### Proposed Data Collections Submitted for Public Comment and Recommendations

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call 404-639-5960 and send comments to Seleda Perryman, CDC Assistant Reports Clearance Officer, 1600 Clifton Road, MS-D74, Atlanta, GA 30333 or send an e-mail to [omb@cdc.gov](mailto:omb@cdc.gov).

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques

or other forms of information technology. Written comments should be received within 60 days of this notice.

### Proposed Project

Supplement to the National Birth Defects Prevention Study: Qualitative Assessment of the Attitudes Mothers Have Toward Collecting Biological Specimens on their Infants and Young Children to Study Risk Factors for Birth Defects and Preterm Delivery—New—National Center on Birth Defects and Developmental Disabilities (NCBDDD), Centers for Disease Control and Prevention (CDC).

### Background and Brief Description

National Center on Birth Defects and Developmental Disabilities (NCBDDD), Centers for Disease Control and Prevention (CDC), has been conducting the National Birth Defects Prevention Study (NBDPS) (OMB# 0920-0010) since 1997. The NBDPS is a case-control study of major birth defects that includes cases identified from existing birth defect surveillance registries in nine states, including metropolitan Atlanta. Control infants are randomly selected from birth certificates or birth hospital records. Mothers of case and control infants are interviewed using a computer-assisted telephone interview.

Parents are asked to collect cheek cells from themselves and their infants for DNA testing. Information gathered from both the interviews and the DNA specimens will be used to study independent genetic and environmental factors as well as gene-environment interactions for a broad range of carefully classified birth defects.

This proposed supplement to the National Birth Defects Prevention Study will use qualitative research to provide data on the barriers to participation in the collection of biological specimens by mothers on themselves, their infants, and young children. It is costly to implement the collection of biological specimens into an interview/questionnaire-based study. However, an ever-increasing number of studies include the examination of environmental and genetic interactions to help medical and public health professional's better target appropriate interventions. A critical component for studies of gene variants is the collection of biological specimens. Participation and non-participation in the collection of biological specimens is not fully understood. We will conduct multiple well-designed focus groups to assess the attitudes of both mothers who participated and mothers who did not participate in the collection of biological specimens to increase the effectiveness

of these studies. This information will be useful to many groups at the CDC who are currently collecting biological specimens from infants and their families but with less than optimal response rates and those who are working to implement studies that include the use of biological specimens.

Scientists from the National Birth Defects Prevention Study in NCBDDD, the Pregnancy Risk Assessment Monitoring System (PRAMS) in National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), and Office of Genomics and Disease Prevention (OGDP) have received Collaborative Initiative intramural funding to conduct focus groups aimed at gaining insight into the barriers and motivations women have for participating in the collection of biological specimens. Among the three collaborating Centers within the Coordinating Center for Health Promotion, NCBDDD's National Birth Defects Prevention Study provides a unique opportunity for exploring the barriers and motivations toward collection of genetic material. This focus group project will recruit mothers who participated in the maternal interview for the NBDPS. There are no costs to the respondents other than their time to participate in the survey.

### ESTIMATED ANNUALIZED BURDEN

Instrument	Number of respondents	Frequency of response	Average burden/response (in hours)	Annual burden hours
Telephone Contact .....	90	1	5/60	7.5
Focus Group Discussion .....	45	1	2	90

Dated: March 12, 2006.

**Joan F. Karr,**

*Acting Reports Clearance Officer, Centers for Disease Control and Prevention.*

[FR Doc. E6-3916 Filed 3-16-06; 8:45 am]

**BILLING CODE 4163-18-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

#### Decision To Evaluate a Petition To Designate a Class of Employees at the Nevada Test Site, Mercury, Nevada, To Be Included in the Special Exposure Cohort

**AGENCY:** Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

### ACTION: Notice.

**SUMMARY:** The Department of Health and Human Services (HHS) gives notice as required by 42 CFR 83.12(e) of a decision to evaluate a petition to designate a class of employees at the Nevada Test Site, Mercury, Nevada, to be included in the Special Exposure Cohort under the Energy Employees Occupational Illness Compensation Program Act of 2000. The initial proposed definition for the class being evaluated, subject to revision as warranted by the evaluation, is as follows:

*Facility:* Nevada Test Site.

*Location:* Mercury, Nevada.

*Job Titles and/or Job Duties:* Workers potentially exposed to above-ground weapons testing.

*Period of Employment:* 1951 to 1963.

**FOR FURTHER INFORMATION CONTACT:** Larry Elliott, Director, Office of

Compensation Analysis and Support, National Institute for Occupational Safety and Health, 4676 Columbia Parkway, MS C-46, Cincinnati, OH 45226, Telephone 513-533-6800 (this is not a toll-free number). Information requests can also be submitted by e-mail to [OCAS@CDC.GOV](mailto:OCAS@CDC.GOV).

Dated: March 10, 2006.

**John Howard,**

*National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention.*

[FR Doc. 06-2588 Filed 3-16-06; 8:45 am]

**BILLING CODE 4163-19-M**